

Application Data Sheet

Application Information

Application Number::	Unassigned
Filing Date::	July 29, 2003
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R::	None
Title::	CYCLOOXYGENASE-2 SELECTIVE INHIBITORS, COMPOSITIONS AND METHODS OF USE
Attorney Docket Number::	102258.158US2
Request for Early Publication?::	No
Request for Non Publication?::	No
Total Drawing Sheets:	0
Small Entity?::	No
Petition Included?::	No
Secrecy Order in Parent Application?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full Capacity
Given Name::	David
Middle Name::	S.
Family Name::	Garvey
City of Residence::	Dover
State or Province of Residence::	Massachusetts
Country of Residence::	U.S.
Street of mailing address::	10 Grand Hill Drive
City of mailing address::	Dover

State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 02030

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Subhash
Middle Name:: P.
Family Name:: Khanapure
City of Residence:: Clinton
State or Province of Residence:: Massachusetts
Country of Residence:: U.S.
Street of mailing address:: 3 Colonial Drive
City of mailing address:: Clinton
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 01510

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Ramani
Middle Name:: R.
Family Name:: Ranatunge
City of Residence:: Lexington
State or Province of Residence:: Massachusetts
Country of Residence:: U.S.
Street of mailing address:: 11 Bates Road
City of mailing address:: Lexington
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 02421

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Great Britain
Status:: Full Capacity
Given Name:: Stewart
Middle Name:: K.
Family Name:: Richardson
City of Residence:: Tolland
State or Province of Residence:: Connecticut
Country of Residence:: U.S.
Street of mailing address:: 55 Autumn Drive
City of mailing address:: Tolland
State or Province of mailing address:: Connecticut
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 06084

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.
Status:: Full Capacity
Given Name:: Joseph
Middle Name:: D.
Family Name:: Schroeder
City of Residence:: Minneapolis
State or Province of Residence:: Minnesota
Country of Residence:: U.S.
Street of mailing address:: 2305 W. 52nd Street
City of mailing address:: Minneapolis
State or Province of mailing address:: Minnesota
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 55410

Correspondence Information

Correspondence Customer Number:: 25270
Phone number:: 202-942-8400
Fax number:: 202-942-8484

Representative Information

Representative Customer Number::	25270	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Nonprovisional	60/398,829	July 29, 2002

Assignment Information

Assignee Name:: NitroMed, Inc.
Street of mailing address:: 12 Oak Park Drive
City of mailing address:: Bedford
State or Province of mailing address:: Massachusetts
Country of mailing address:: U.S.
Postal or Zip Code of mailing address:: 01730